



Testimony of the American Lung Association in Connecticut regarding House Bill 5219, An Act Prohibiting the Use of Electronic Cigarettes in Schools

February 23, 2015
Public Health Committee
Legislative Office Building, Room 3000
Hartford, CT 06106

Distinguished Chairpersons and Members of the Public Health Committee:

My name is Ruth Canovi and I serve as the Manager of Public Policy for the American Lung Association in Connecticut. The American Lung Association is a not-for-profit public health association dedicated to saving lives by improving lung health and preventing lung disease.

First off, I would like to commend Representative Carney for raising the important, yet complicated and controversial issue of electronic cigarettes. The American Lung Association is very concerned about the growing popularity of these products, which are often misrepresented as being safe. The truth is there is still much to learn, but right now, these products are completely unregulated, vary widely in their composition and therefore potential health effects. Furthermore, the American Lung Association is troubled that they may be starting kids on the path of a lifetime nicotine addiction. Nearly all e-cigarettes contain nicotine that is derived from tobacco. In 2010, federal courts ruled that e-cigarettes could be regulated as tobacco products under FDA's Center for Tobacco Products, particularly since e-cigarette manufacturers "assert that their electronic cigarettes qualify as a tobacco product." This is why we would like to see these products defined and treated as tobacco products on a broader scale in our Connecticut statutes. Additional and on-going research is needed to understand the full public health impact of e-cigarettes, but in the meantime, we cannot wait for the federal government to act.

Electronic cigarettes are gaining popularity among youth at alarming rates. In December 2014, a national study found that electronic cigarette use among teens now exceeds traditional cigarette smoking. This study, "Monitoring the Future," found that e-cigarette use among 8th and 10th graders was double that of traditional cigarette smoking.

E-cigarettes are available in hundreds of different flavor combinations – many that appeal to children and teens, including cotton candy, bubble gum, chocolate, strawberry and gummy bear. We are seeing advertising strategies identical to those historically used to market cigarettes, appealing to youth through use of celebrity spokespeople, cartoons and popular teen ideals like freedom and rebellion.

House Bill 5219 has the potential to be a good start on this path to stronger regulation of electronic cigarettes, especially in regard to youth access. The American Lung Association in Connecticut does still have a number of questions regarding the details of this proposed legislation - the answers to which would determine our support or opposition. We will be looking for the legislation to address the following questions and details as we assess whether or not we consider the proposed legislation comprehensive and good public health policy:

We want to be sure that the bill is specific enough to protect youth from exposure to these products in all aspects of school life. We ask that you ensure the legislation includes not just school buildings, but all school property/grounds of institutions educating students in any and all grades K-12 (as well as school sponsored events off site), for 24 hours a day/ 7 days a week, apply to youth and adults and lastly, we would hope this bill would not be preemptive.

Electronic cigarettes are getting a lot of attention these days. There is still much we need to learn about them and their long term health effects, but what we do know can help us to create good policy to protect the health of Connecticut youth. I have attached our policy statement on electronic cigarettes as a whole and welcome any opportunity to work with the committee to help shape quality public health policy around these controversial products. Thank you for taking this step in a more comprehensive approach to electronic cigarettes.

Thank you,

A handwritten signature in cursive script that reads "Ruth Canovi".

Ruth Canovi, MPH
Manager, Public Policy
American Lung Association in Connecticut

E-Cigarettes

October 2014

POSITION:

The American Lung Association:

- Supports including e-cigarettes in smokefree laws and ordinances.
- Supports state laws that would prohibit the sale of any flavored e-cigarette product.
- Supports taxing e-cigarettes at a rate equivalent with all tobacco products, including cigarettes.
- Supports eliminating e-cigarette sales to youth, otherwise restricting youth access to e-cigarettes and requiring e-cigarette retailers to be licensed. E-cigarettes should be defined as tobacco products.
- Opposes creating new definitions for “vapor products” and/or “alternative nicotine products” in state laws. This tactic, which the tobacco industry is promoting in numerous states, has the potential to undermine existing tobacco control laws, including smokefree laws and tobacco taxes.

Background

- On April 24, 2014, the U.S. Food and Drug Administration (FDA) issued its proposal to begin oversight over e-cigarettes as tobacco products. Comments were due to FDA on August 8, 2014. The American Lung Association has urged FDA to finalize this regulation by the end of 2014.
- According to the FDA, electronic cigarettes, or e-cigarettes, are devices that allow users to inhale a vapor containing nicotine or other substances.¹
- Unlike traditional cigarettes, e-cigarettes are generally battery-operated and use an atomizer to heat liquid from a cartridge until it becomes a chemical-filled aerosol.
- E-cigarettes are often available in flavors that may appeal to children and teens, including cotton candy, bubble gum, chocolate, strawberry and mint.²
- There are almost 470 different brands of e-cigarettes on the market today, and e-cigarettes come in 7,700 different flavors.³
- The class of e-cigarettes also includes e-hookahs, e-pens, e-cigars and other electronic products, all of which would be subject to FDA oversight.

Who Uses E-Cigarettes?

- An increasing number of youth: According to CDC, the number of students in grades 6-12 reporting having ever used an e-cigarette doubled from 3.3 percent to 6.8 percent from 2011 to 2012. Recent use of e-cigarettes among students grades 6-12 increased from 1.1 percent to 2.1 percent.⁴
- Adults: According to CDC, during 2010 to 2013, adults reporting that they have ever used an e-cigarette increased among every demographic group except those aged 18-24 years old, Hispanics, non-Hispanic Others, and those living in the Midwest.⁵
- Former and current smokers: In 2013, close to one in ten former and more than one in three current cigarette smokers had used an e-cigarette, which was an increase compared to 2011 for both groups. E-cigarette use among those who never had smoked cigarettes was a much lower 1-2 percent and did not increase over this period.⁶
- Current smokers: From 2010-2011, 72.0 percent of people who recently used e-cigarettes also currently smoked conventional cigarettes. That number rose to 76.8 percent during 2012-2013.⁷
- Additional and on-going research is needed to understand the full public health impact of e-cigarettes, including their impact on youth initiation, and whether current smokers are switching to these products instead of quitting or are using them in conjunction with regular cigarettes.

What are the Health Effects of E-Cigarettes?

- The health consequences of the use of e-cigarettes and exposure to secondhand e-cigarette emissions are unknown. There is currently no scientific evidence establishing the safety of e-cigarettes.
- In initial lab tests conducted in 2009, FDA found detectable levels of toxic cancer-causing chemicals, including an ingredient used in anti-freeze, in two leading brands of e-cigarettes and 18 various cartridges.⁸ The lab tests also found that cartridges labeled as nicotine-free had traceable levels of nicotine.
- There is no evidence that shows the aerosol emitted by e-cigarettes is safe for non-users to inhale. In fact, two initial studies have found formaldehyde, benzene and tobacco-specific nitrosamines (a carcinogen) coming from the secondhand emissions from e-cigarettes. The use of e-cigarettes in public places and workplaces may also complicate efforts to enforce and comply with smokefree laws. The American Lung Association supports including the use of e-cigarettes in worksites and public places under smokefree laws.

Can E-Cigarettes Help Someone Quit Smoking?

- The FDA has not approved any e-cigarettes as a safe or effective method to help smokers quit. The U.S. Public Health Service has found that the seven therapies approved by the U.S. Food and Drug Administration in combination with individual, group or phone cessation counseling is the most effective way to help smokers quit. Until and unless the FDA approves a specific e-cigarette for use as a tobacco cessation aid, the American Lung Association does not support any direct or implied claims that e-cigarettes help smokers quit.
- A 2014 study published in the journal *Cancer* found that among cancer patients enrolled in a smoking cessation program, e-cigarette users were as likely or less likely as individuals who did not use e-cigarettes to still be smoking.⁹

Why Are E-cigarettes Tobacco Products?

- In 2010, the U.S. Court of Appeals for the District of Columbia determined that e-cigarettes should be regulated as tobacco products except when a product makes a therapeutic (quit smoking) claim. The American Lung Association has urged FDA to finalize its proposed regulation by the end of 2014 so that it can begin its oversight over e-cigarettes and other unregulated tobacco products.
- E-cigarette companies sued FDA to be regulated as tobacco products.
- The nicotine used in e-cigarettes is derived from tobacco.
- E-cigarette marketing mirrors strategies used by cigarette companies in the past, which they are no longer allowed to use because they appeal to youth.
- FDA has not found e-cigarettes safe and effective in helping smokers quit.

For More Information Please Contact:

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¹ U.S. Food and Drug Administration. "E-Cigarettes: Questions and Answers." September 9, 2010. Available at: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm225210.htm>.

² U.S. Food and Drug Administration. "FDA Warns of Health Risks Posed by E-Cigarettes." July 23, 2009. Available at: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm173401.htm>.

³ Zhu SH et al. "Four hundred and sixty brands of e-cigarettes and counting: implications for product regulation." *Tobacco Control*. July 2014; 23 Suppl 3:ii3-ii9.

⁴ Centers for Disease Control and Prevention. "Electronic Cigarette Use Among Middle and High School Students — United States, 2011–2012." *Morbidity and Mortality Weekly Report*. September 6, 2013; 62(35):729-30.

⁵ King, BA, Patel R, Nguyen K, Dube S. "Trends in Awareness and Use of Electronic Cigarettes Among U.S. Adults, 2010–2013." *Nicotine & Tobacco Research*. September 2014; ntu191v3-ntu191.

⁶ King, BA, Patel R, Nguyen K, Dube S. "Trends in Awareness and Use of Electronic Cigarettes Among U.S. Adults, 2010–2013." *Nicotine & Tobacco Research*. September 2014; ntu191v3-ntu191.

⁷ King, BA, Patel R, Nguyen K, Dube S. "Trends in Awareness and Use of Electronic Cigarettes Among U.S. Adults, 2010–2013." *Nicotine & Tobacco Research*. September 2014; ntu191v3-ntu191.

⁸ U.S. Food and Drug Administration. "Summary of Results: Laboratory Analysis of Electronic Cigarettes Conducted by FDA." July 22, 2009. Available at: <http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm173146.htm>.

⁹ Borderud, S. P., Li, Y., Burkhalter, J. E., Sheffer, C. E. and Ostroff, J. S. (2014), Electronic cigarette use among patients with cancer: Characteristics of electronic cigarette users and their smoking cessation outcomes. *Cancer*. doi: 10.1002/cncr.28811